FINANCIAL STATUS REPORT

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			TATUS REPORT						١
		g Form)	·				U K		
Federal Agency a	nd Organizational Element	tions on the back) Identifying Number Assigns	entifying Number Assigned			OMB Approval Page of		46/11	
to Which Report is						,	1 1	AIGINAL	
	nce Commission					39	page	25	
l	tation (Name and complete ad		Caracolia Diod C. Ol						
West Virginia St	ecretary of State, Buildin	ig 1 Suite 157K 1900 i	Kanawna Bivo, E., Cr	iarieston, vv	V 2530	מי			
4. Employer Identific	ation Number	ber or Identifying Number	er or Identifying Number 6. Final Report						
55-6000798 8854 Title 251 Funds			ls	☐ Yes ☐ No		☑ Cash ☐ Accrual			
8. Funding/Grant Period (See instructions)				9. Period Covered by this Report					
From: (Month, Day, Year) To: (Month, Day, Year) 4/29/2003 9/30/2003			1	From: (Month, Day, Year) 10/1/2002			Day,		
10. Transactions:			1 1			9/30/2003			_
			Previously Reported	This Pa	Cumulative				
a. Total outlays			9,340.50	2,046	,173.88	2,055,514.38			8
b. Refunds, rebates, etc.						0.00			_
c. Program income used in accordance with the deduction alternative									
_						0.00			
d. Net outlays (Line a, less the sum of lines b and c)			9,340.50	2,046	,173.88	2,055,514.38			8
Recipient's share of	finet outlays, consisting of		gggistgregories aus ar geotres en el 1700. I		egengeene.		segue e	rantinisti oppidi	
Recipient's share of net outlays, consisting of: e. Third party (in-kind) contributions						0.00			0
f. Other Federal awards authorized to be used to match this award						0.00			0
g. Program income used in accordance with the matching or cost						0.00			
sharing alternative h. Ali other recipient outlays not shown on lines e, f or g				 		0.00			-
						0.0			D
i. Total recipient share of net outlays (Sum of lines e, f, g and h)			0.00		0.00	0.00			o
i Federal share	of net outlays (line d less line	#					e de la composición dela composición de la composición dela composición de la compos		
			9,340.50	2,046	173.88	2,055,514.38			8
k. Total unliquidated obligations			(2.15)(6.06)(3.07)(2.15)	医杂合金					
I. Recipient's share of unliquidated obligations									HPAR-
m. Federal share of unliquidated obligations						1			_
						250,000.00			2
n. Total Federal share (sum of lines j and m)						2,305,514.38			8
o. Total Federal funds authorized for this funding period						15,303,569.00			
p. Unobligated balance of Federal funds (Line o minus line n)									
							12,99	8,054.6	2
Program income, consisting of:			A/46-1-450-6-1-11-11-11-11-11-11-11-11-11-11-11-11	7.5 m (25) (75)/5					
d. Disbursed program income shown on lines c and/or g above f. Disbursed program income using the addition alternative			The second property of the second	100000000000000000000000000000000000000					
r. Disbursed pro	oficer income nated the social	nt anothative		10.84					
s. Undisbursed p	program income		Berei Geröberen den den Gro			0.00		o	
t. Total program income realized (Sum of lines q, r and s)									
	Tune of Date (Diagonal)	annonniate territ						0.0	4
11. Indirect	a. Type of Rate (<i>Place "X" in</i> ☐ Provisio	ietermined	ermined						
Expense	b. Rate c. Base		d. Total Amount e,		Federal Share			7	
12 Bomodes Atto									_
 Remarks: Attac governing legis 	ch any explanations deemed r slation.	evessary or information req	uirea by r-eaeral sponsofil	ig agency in c	ompliance	with			
	ollects interest on funds.								
13. Certification: 1	cartify to the heet of my	udadna and halist that this	ronort is somet and	nnista and sta	d 511 =41	ue and			_
	certify to the best of my kno nilquidated obligations are f	-	=	opiece and tha	n an outl	iys and			***************************************
Typed or Printed Nam		Telephone (Area code, number and extension)					—		
Cindy Smith-Manager-Elections Division					304-558-6000				4
Signature of Authorized Certifying Official					Date Report Submitted March 29, 2005				
(V. O. hunter									

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Standard Form 269 (Rev. 7-97)